

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
2010 JAN 19 AM 11:41

**COMMITTEE NAME** (Must be same as on Statement of Organization)

BOESEN FOR SCHOOL BOARD

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

CONNIE BOESEN

Political Party (if applicable)

Office Sought

DES MOINES SCHOOL BOARD

District (if Senate or House)

FORM  
**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

[Signature]  
SIGNATURE OF PERSON FILING REPORT

515-778-7063  
TELEPHONE

1/19/10  
DATE SIGNED

I AM FILING A

1/19/10

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

6748

3,665.00  
1,478.00

3720.80  
1,478.00  
11.68

-0-

YES NO

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

**BOESEN FOR SCHOOL BOARD**

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
08/31/09	ID# 433 CK# 1027	SOUTH CENTRAL IOWA FEDERATION OF LABOR 3000 WALKER ST DES MOINES IA 50317		\$ 100 <sup>00</sup>	<input checked="" type="checkbox"/>
08/31/09	ID# CK# 4015	JC + SUSAN TWEED 1820 130 <sup>th</sup> ST BOONE IA 50036		50 <sup>00</sup>	<input checked="" type="checkbox"/>
08/31/09	ID# CK# 2394	GLORIA + LYLE HOFFMAN 4200 LEONARD PLACE DES MOINES IA 50310		30 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 1259	IRVIN LEWIS + LINDA CARTER LEWIS 3141 SW 38 <sup>th</sup> PL DES MOINES IA 50321		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 601	JOSEPH BRICK 550 39 <sup>th</sup> # 200 DES MOINES IA 50312		125 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 7213	MICHAEL + DEBORAH HUBBELL 3717 LINCOLN PL DR DES MOINES IA 50317		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 5920	DICK + SHARON DEARDON 3113 KINSEY AV DES MOINES IA 50317		25 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 5038	LISA NAKASHIMA 1514 47 <sup>th</sup> ST DES MOINES IA 50317		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 9260	LAWRENCE + MARILYN STAPLES 3509 CAULDER AV DES MOINES IA 50321		25 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 4342	ROGER + SUSAN HUDSON 3919 HILLCREST DR DES MOINES IA 50310		20 <sup>00</sup>	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 625 <sup>00</sup>	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

BOESSEN FOR SCHOOL BOARD

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
09/11/09	ID# CK# 3119	WILLIAM + KATHLEEN LILLYS 3000 PATRICIA DR DES MOINES IA 50322		\$ 100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 24056	LYLE SIMPSON 3131 FLEUR DR DES MOINES IA 50321		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 7211	ALAN ZUCKER 1515 LINDEN ST DES MOINES IA 50309		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 5870	ROBERT + HEATHER SOENER 2013 69th WINDSOR HEIGHTS IA 50322		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 4909	KASSIE SPELLMAN 4012 JOHN LYNDE ROAD DES MOINES IA 50312		75 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 4888	PATRICK SPELLMAN 4012 JOHN LYNDE RD DES MOINES IA 50312		75 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 16512	CONNIE COOK 4039 OULD DES MOINES IA 50310		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 1699	JEANETTE WOODS 3204 4th DES MOINES IA 50313		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 2686	KENT MAUCK 3822 GREENWOOD DR DES MOINES IA 50312		20 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 3935	DOUG + EILEEN GROSS 4117 ASHBY DES MOINES IA 50310		50 <sup>00</sup>	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 670<sup>00</sup>

TOTAL (if last page of this schedule)

\$

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Page 2 of 4  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

BOESEN FOR SCHOOL BOARD

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09/11/09	ID# CK# 8372	WM C WALLING 2329 TOMLIN LN DES MOINES IA 50317		\$ 40 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 2766	RICHARD + JANE HEIN 3819 THORTON DES MOINES IA 50321		30 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 8738	BOB + JOANNE MAHAFFEY 2220 E 32 <sup>ND</sup> DES MOINES IA 50317		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 1307	JAMES + CATHERINE ERCKSON 3915 THORTON DES MOINES IA 50321		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 8169	BERNARD + BARBARA TOOS 4814 EUCLID DES MOINES IA 50310		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 4958	11M + SHEILA DREYER 321 GLEN VIEW DR DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 3092	TERRY HANCOCK 4324 WOODLAND DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 7004	JAMES COWME 141 37 <sup>TH</sup> DES MOINES IA 50312		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/11/09	ID# CK# 9573	ROBERT BURNETT 2942 SIOUX CT DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/28/09	ID# CK# 2458	ELIZABETH GOODWIN 3930 GRAND #206 DES MOINES IA 50312		300 <sup>00</sup>	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 820 <sup>00</sup>	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

**BOESEN FOR SCHOOL BOARD**

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
09/28/09	ID# CK# 3482	WILLIAM + MAURILEEN TIFANE 339 49th DES MOINES IA 50312		\$ 25 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 16457	M. B. SWANSON 3808 E 16th #18 DES MOINES IA 50318		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 7704	WILLIAM + SHERYL PATTERSON 808 S. Y ST INDIANOLA IA 50125		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 2743	CHRISTINE + STEVE HENSLEY 753 55th DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 6828	GREG ORLEISHA BARCUS 4930 COUNTRY CLUB BLVD DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 5993	HARDY BOOKEY 400 LOCUST #490 DES MOINES IA 50309		100 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 5703	MARC + LIZ WARD 5004 WOODLAND AV DES MOINES IA 50312		200 <sup>00</sup>	<input checked="" type="checkbox"/>
09/03/09	ID# CK# 183	JANET + CHARLES BETTS 2002 S W 30th DES MOINES IA 50312		75 <sup>00</sup>	<input checked="" type="checkbox"/>
10/06/09	ID# CK# 11061	RANDY + MARY GORDON 219 42nd ST DES MOINES IA 50312		50 <sup>00</sup>	<input checked="" type="checkbox"/>
12/30/09	ID# CK# 4977	TED BOESEN 3011 DON LEE CT. DES MOINES IA 50312	HUSBAND	850 <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$ 1550<sup>00</sup>

TOTAL (if last page of this schedule)

\$ 3,165<sup>00</sup>

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Page 4 of 4  
(for Schedule A)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization)**
BOESON FOR SCHOOL BOARD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/31/09	ID# CK# NA	IOWA STATE BANK 627 E LOCUST DES MOINES IA 50309	BANK CHARGES	\$ 7 <sup>72</sup>
09/31/09	ID# CK# NA	IOWA STATE BANK 627 E LOCUST DES MOINES IA 50309	BANK CHARGES	10 <sup>76</sup>
10/24/09	ID# CK# 1001	CARTER PRINTING 1739 E GRAUD DES MOINES IA 50311	PRINTING LETTERS	81 <sup>92</sup>
10/30/09	ID# CK# NA	IOWA STATE BANK 627 E LOCUST DES MOINES IA 50309	BANK CHARGES	7 <sup>52</sup>
9/15/09	ID# CANDIDATE CK# PAID	GARNER PRINTING 1697 NE 53 <sup>RD</sup> AV DES MOINES IA 50312	POST CARDS + POSTAGE	1425 <sup>20</sup>
9/15/09	ID# CANDIDATE CK# PAID	US POSTAL SERVICE 4023 URBANKALE DES MOINES IA 50310	POSTAGE THANK YOUS	52 <sup>80</sup>
12/15/09	ID# CK# 1002	COMPETITIVE EDGE 3500 109 <sup>TH</sup> ST DES MOINES IA 50322	YARD SIGNS + WIRDS	2,119 <sup>94</sup>
11/30/09	ID# CK# NA	IOWA STATE BANK 627 E LOCUST DES MOINES IA 50309	BANK CHARGES	7 <sup>42</sup>
SUB-TOTAL				\$ 3713 <sup>36</sup>
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

BOESSEY FOR SCHOOL BOARD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/30/09	ID# CK# 1003	CONNIE BOESSEY 3011 DON LEE CT. DES MOINES IA 50317	REPAY LOAN	\$
12/31/09	ID# CK# N/A	IOWA STATE BANK 627 E LOCUST DES MOINES IA 50309	BANK CHARGES	7.52
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 7.52
TOTAL (if last page of this schedule)				\$ 3720.80

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

RESET

COMMITTEE NAME (Must be same as on Statement of Organization)

BOESON FOR SCHOOL BOARD

SCHEDULE

F

(Rev. 02/08)

LOANS  
RECEIVED  
& REPAYED☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0 -

## PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
09/15/09	CONNIE BOESON 3011 DON LEE COURT DES MOINES, IA 50317		\$ 1425 <sup>20</sup>
09/15/09	CONNIE BOESON 3011 DON LEE COURT DES MOINES, IA 50317		\$ 52 <sup>80</sup>

TOTAL (PART I)

\$ 1478<sup>00</sup>

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
12/30/09	CONNIE BOESON 3011 DON LEE CT. DES MOINES, IA 50317		\$ 1478 <sup>00</sup>

TOTAL CASH REPAYMENTS (PART II)

\$ 1478<sup>00</sup>

From Schedule E -- TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 0 -

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Page 1 of 1  
(for Schedule F)